

HARRISHEALTH SYSTEM



Harris Health System

How and Where Service Linkage Fits in a Routine HIV Screening Program



Project RUSH -- Background

2008-2009 Began routine opt-out screening

at Ben Taub and LBJ

2010-2011 Added 12 community health

centers

2012 Added 6 Healthcare for the

Homeless clinic sites

(4 more to be added by year-end)



Project RUSH – Key Features

- We use an opt-out process
- We use standard blood testing processed on a rapid basis (ERs only)
- We make it easy for staff:
 - No extra paperwork
 - No extra procedures
 - No requirements for extra time spent with patients



Key Features (continued)

- We work closely with the local public health authority to verify new/existing cases
- We use dedicated service linkage staff to ensure comprehensive follow-through to care



Project RUSH Stats August 4, 2008 – October 14, 2012

Total Tests 255,682

New Positives 811

Prevalence 0.32%

Previous Positives 3,091

Overall Prevalence 1.21%

Total Positives 3,902



Purpose of Service Linkage

National HIV/AIDS Strategy Goal

Increase the proportion of newly diagnosed patients linked to clinical care within 3 months of their HIV diagnosis from 65 to 85 percent by 2015.



What is the service linkage role?

- Provide HIV testing services
- Conduct and document patient assessments
 - For hospitalized patients
 - For patients new to Thomas Street
- Assist patients with access and adherence
- Assure completion of referral process
- Assist patients in navigating agency procedures



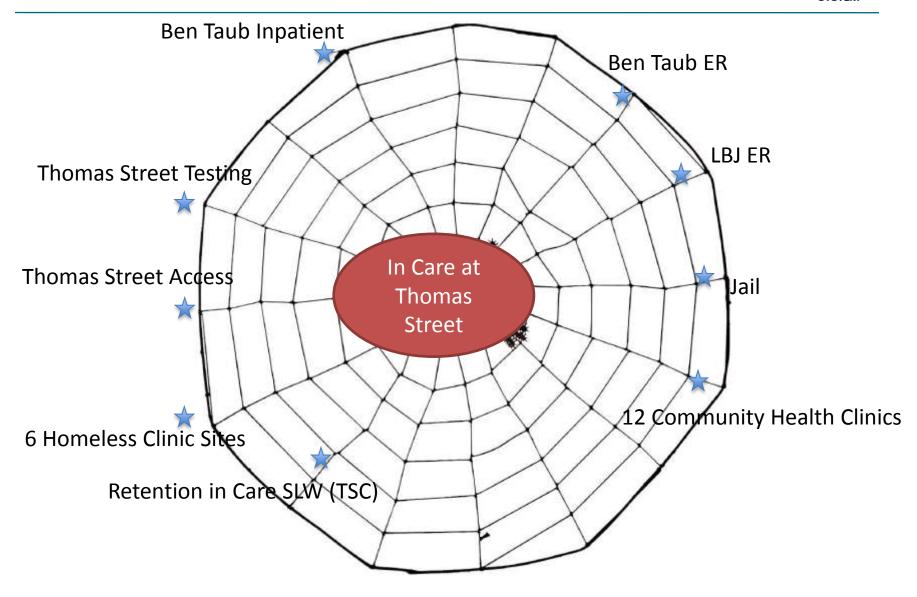
Service linkage role (continued)

 Work with case managers and other clinic staff to ensure patient care plans are implemented



Model of the Service Linkage System







Results -- Linkage to Care

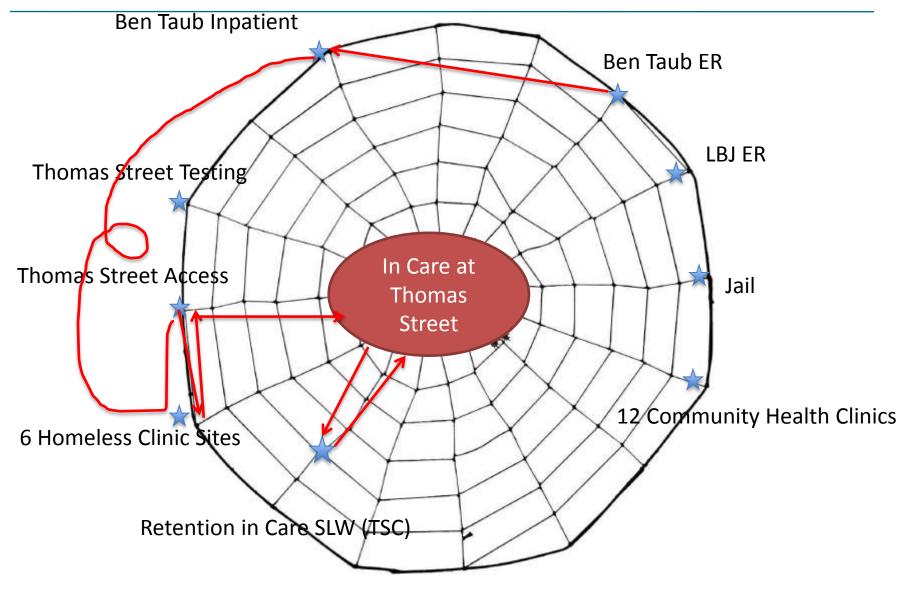
Linkage to Care:

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2008
25%
2009
44%
2010
47%
2011
62%
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Health Status:

Percent with CD4 greater than 350 c/mm3 appears to be increasing.







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